

Mandatory (NRS 68-911(1))

[illegible]

Heritage Health Adult Program

Services Comparison - Optional Services (NRS 68-911(2)(3)(4))

Eligibility Category	Newborn to Age 1	Children Ages 1-5	Children Ages 6-18	CHIP	599 CHIP (Pregnancy related & prenatal care only)	Former Foster Care	Former Ward	Subsidized Adoption	Subsidized Guardianship	Extended Subsidized Guardianship or Adoption	Katie Beckett	Children in an Institution for Mental Disease	Parent/Caretaker Relative	Pregnant Women	Transitional Medical Assistance	Aged, Blind, or Disabled	Aged, Blind, & Disabled Qualified Medicare Beneficiary	Medicare Savings Program Qualified Medicare Beneficiaries ¹	SLMB (Payment of Medicare part B premium only)	QI-1 (Payment of Medicare part B & D premiums)	Medicaid Insurance for Workers with Disabilities	Medically Needy	Breast & Cervical Cancer (Breast or cervical cancer treatment only)	Emergency Medical Services for Aliens	Presumptive Eligibility for Pregnant Women ²	Hospital Based Presumptive Eligibility	Hospital Based Presumptive Eligibility for Pregnant Women ³
Prescribed Drugs	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Intermediate Care Facilities for persons with Developmental Disabilities (ICF/DD)	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care
Home and Community Based Services waivers	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care	Must meet level of care
Dental	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Rehabilitation	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Personal Care	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Durable Medical Equipment	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Medical Transportation	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Vision Related	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Speech Therapy	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Physican Therapy	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Chiropractic	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Optometric	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Pediatric	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Hospice	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Mental Health and Substance Abuse	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Hearing Screening services for newborn and infant children	X																										
Community based secure residential and sub-acute behavioral health services	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Services provided as a part of Individualized Education program	X	X	X	X				X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Services provided as a part of Individualized Family Service Plan	X	X	X	X				X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X

¹ (Payment of Medicare part B premium only)

² (Ambulatory prenatal care only)

³ (Ambulatory prenatal care only)